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APPLICANTS

Donato O. Forlenza, Hopewell Junction, NY;
 Orazio P. Forlenza, Hopewell Junction, NY;
 William J. Hurley, Poughkeepsie, NY; Bryan J. Robbins, Poughkeepsie, NY;

**** CONTINUING DATA ******* *none gme*

**** FOREIGN APPLICATIONS ******* *none gme*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>gme</i> Initials	STATE OR COUNTRY NY	SHEETS DRAWING 6	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
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ADDRESS
 30206
 IBM CORPORATION
 ROCHESTER IP LAW DEPT. 917
 3605 HIGHWAY 52 NORTH
 ROCHESTER, MN
 55901-7829

TITLE
 Automated bist test pattern sequence generator software system and method

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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